	in this information to									
Dei	btor 1	Roy A. Walla	ce			_				
1 -	btor 2 buse, if filing)					_				
Uni	ited States Bankrup	tcy Court for the:	DISTRICT OF MARYL	AND, BALTIMORE	DIVISION	_				
Cas	se number 1:1	8-bk-14827					Check if this is:			
(If kr	nown)					<b>\</b>	An amended filing			
_									owing postpetition of ollowing date:	chapter 13
O.	fficial Form	<u> 1061</u>					MM / DD/ Y	YYY	_	
S	chedule I: `	Your Inco	me							12/15
atta	ch a separate shee	et to this form. Or e Employment	spouse is not filing witl							
١.	information.	Oyment		Debtor 1			Debtor 2	Debtor 2 or non-filing spouse		
	If you have more to	ate page with	Employment status	■ Employed			■ Emple	■ Employed		
	attach a separate information about employers.		Occupation	☐ Not employed			☐ Not e	mploye	ed	
	Include part-time, self-employed wor		Employer's name	EOS			Dept O	f Defe	ens	
		ccupation may include student or Employer's address memaker, if it applies.  185 Alewife Brook Pkwy 9 200 Cambridge, MA 02138-110		-						
			How long employed th	nere? 6 mon	ths					
Par	rt 2: Give De	tails About Mont	hly Income	-						
Esti unle If yo	mate monthly inco	ome as of the dat d. spouse have more	e you file this form. If you than one employer, comb	ŭ	'	,	for that person on	the line	es below. If you ne	
							For Debtor 1		Debtor 2 or n-filing spouse	I
2.			r, and commissions (before the local commission) to the monthly was a second commission.		2.	\$	7,234.72	\$_	8,036.17	
3.	Estimate and list	t monthly overtin	ne pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross	Income. Add line	2 + line 3.		4.	\$	7,234.72	\$	8,036.17	

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Debt	Wallace, Roy A.	_	Case	number (if known)	1:18-bk-148	327
	Copy line 4 here	4.	For	Debtor 1 7,234.72	For Debtor 3 non-filing s	
5.	List all payroll deductions:					
0.	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: FEGLI Vision Dental	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,705.32 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$	756.11 336.09 382.03 228.82 388.92 0.00 0.00 30.75 22.95 84.74
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$ \$	1,705.32	· <del></del>	230.41
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	* — \$	5,529.40	·	805.76
8.	List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify: Prorated Tax Refund	8a. 8b. 8c. 8d. 8e. 8f. 8g. 8h.+	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,200.00 0.00 0.00 0.00 0.00 0.00 0.00 1,100.00	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,300.00	\$	0.00
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	7	7,829.40 + \$_	4,805.76	= \$ 12,635.16
11.	State all other regular contributions to the expenses that you list in Schedule. Include contributions from an unmarried partner, members of your household, your do other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available.	ependent		·		+\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The result write that amount on the Summary of Schedules and Statistical Summary of Certain					\$ 12,635.16 Combined
13.	Do you expect an increase or decrease within the year after you file this form?  ■ No. □ Yes. Explain:	?				monthly income

Official Form 106I Schedule I: Your Income page 2

Fill in t	this inform	ation to identify you	ur case:			l		
Debtor Debtor	1	Roy A. Walla				Ch	eck if this is:  An amended filing A supplement sho expenses as of th	owing postpetition chapter 13
United	States Ban	kruptcy Court for the:	DISTRIC DIVISIO	CT OF MARYLAND, BALT N	IMORE		MM / DD / YYYY	
Case n (If know	_	I:18-bk-14827						
		orm 106J e <b>J: Your E</b>	 Expen	ses				12/1:
Be as inform	complete	and accurate as p	oossible. I ded, attac	f two married people are				
•	s this a jo No. Go			te household?				
		No	·	al Form 106J-2, Expenses	for Separate Househ	noldof Debt	or 2.	
2. D	o you ha	ve dependents?	□No					
	Do not list Debtor 2.	Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not stat lependent				son		10	□ No ■ Yes □ No
					Daughter		6	■ Yes
					son		19	□ No ■ Yes □ No □ Yes
е	expenses	openses include of people other the nd your dependen	an ┌	No Yes				_ 🗀 165
expen	ate your	a date after the ba	ur bankru	r Expenses ptcy filing date unless yo is filed. If this is a suppl				
value		ssistance and hav		overnment assistance if d it on Schedule I: Your			Your ex	rpenses
		or home ownersh and any rent for the		es for your residence. In ot.	clude first mortgage	4.	\$	2,800.00
If	f not inclu	ided in line 4:						
		estate taxes erty, homeowner's,	or renter's	insurance		4a. 4b.		0.00
		e maintenance, rep				4c.	·	100.00
		eowner's association mortgage paymer		ominium dues u <mark>r residence,</mark> such as hon	ne equity loans	4d. 5.		0.00 0.00

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Deb	tor 1 Wallace, Roy A.	Case nun	nber (if known)	1:18-bk-14827
_				
6.	Utilities:	60	œ.	200.00
	6a. Electricity, heat, natural gas		\$	300.00
	6b. Water, sewer, garbage collection		\$	70.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d. Other. Specify: cell phones	6d	\$	200.00
7.	Food and housekeeping supplies	7.	\$	950.00
8.	Childcare and children's education costs	8.	\$	200.00
9.	Clothing, laundry, and dry cleaning	9.	\$	250.00
	Personal care products and services	10.	·	200.00
11.	Medical and dental expenses	11.	· · · · · · · · · · · · · · · · · · ·	150.00
	<b>Transportation.</b> Include gas, maintenance, bus or train fare.		· <del></del>	
	Do not include car payments.	12.	\$	125.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
14.	Charitable contributions and religious donations	14.	\$	250.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a	\$	0.00
	15b. Health insurance	15b	\$	0.00
	15c. Vehicle insurance	15c	· · · · · · · · · · · · · · · · · · ·	150.00
	15d. Other insurance. Specify:	15d	·	
16	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
16.	Specify:	16.	\$	0.00
17.	Installment or lease payments:		'	<u> </u>
	17a. Car payments for Vehicle 1	17a	\$	498.00
	17b. Car payments for Vehicle 2	17b	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other Specify:	17d		0.00
8.	Your payments of alimony, maintenance, and support that you did not report	rt as		
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 10		\$	0.00
19.	Other payments you make to support others who do not live with you.	•	\$	0.00
	Specify:	19.	•	
20.	Other real property expenses not included in lines 4 or 5 of this form or on 5	Schedule I: You	ır Income.	
	20a. Mortgages on other property	20a	\$	780.00
	20b. Real estate taxes	20b	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d	·	
			*	0.00
	20e. Homeowner's association or condominium dues	20e		0.00
.1.	Other: Specify: Daycare	21.	+\$	600.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	8,023.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2	\$	
			I	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	8,023.00
23.	Calculate your monthly net income.		•	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a		12,635.16
	23b. Copy your monthly expenses from line 22c above.	23b	-\$	8,023.00
	23c. Subtract your monthly expenses from your monthly income.			4 2 4 2 4 2
	The result is your monthly net income.	23c	\$	4,612.16
24.	Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?  No.			ase or decrease because of a
	Yes. Explain here:			
	<u> </u>			

Fill in this in	nformation to identify y	our case:			
Debtor 1	Roy A. Wallace	Middle Nome	Lost Nama		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	ND, BALTIMORE DIVISION		
Case number	1:18-bk-14827				
(if known)					☐ Check if this is an amended filing
ou must file thing thing the staining money rears, or both. 1	is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1	le bankruptcy schedules n connection with a bank	sible for supplying correct in or amended schedules. Mak ruptcy case can result in fine	ing a false statement, c	
	n Below	one who is NOT an attor	ney to help you fill out bankr	uptcy forms?	
■ No	,g p.,		,		
☐ Yes. I	Name of person				Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed wit	h this declaration and	
X /s/ Roy	y A. Wallace		X		
Roy A	. Wallace ire of Debtor 1		Signature of Deb	otor 2	
Date	August 10, 2018		Date		